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	U <sup>-</sup>	<b>FILITY</b>	Attorney L	Docket No.	A01381-US	3	र्वे
F	PATENT APPLICATION		First Inver	ntor	Hormann		
TRANSMITTAL		Title	Title		Diacylhydrazine ligands for modulating the expression of exogenous genes in mammalian systems via an ecdysone receptor complex		
(Only for	new nonprovisiona	applications under 37 CFR 1.53(b))	Express M	Express Mail Label No. EU858958353US			
See MPEP		ION ELEMENTS ming utility patent application contents.	ADDRE	SS TO:	Commission P.O. Box 14	atent Application ner for Patents 50 VA 22313-1450	
(Submi) Applic See 3 3. See 3 3. Specifi (prefen - Desci - Cross - State - Refer or a c - Back - Brief - Detai - Claim - Abstr  4. Drawii  5. Oath or Dec a. Me b. Co (for	it an original and a cant claims small 7 CFR 1.27. For a carrier to the instruction of the Description of the Instruction of th	[Total Pages 115 ] et forth below) vention ated Applications ed sponsored R & D listing, a table, listing appendix ution vention Drawings (if filed)  re  113) [Total Sheets] [Total Sheets] iginal or copy)  pplication (37 CFR 1.63(d)) visional with Box 18 completed)  INVENTOR(S) application, see 37 CFR	8. Nucle (if app a. [ b.	i. Pap  ii. Pap  Statement  CCOMPAN  Assignment F 37 CFR 3.73( when there is English Trans Information D Statement (ID Preliminary A Return Recei (Should be sp. Certified Copy (if foreign pric Nonpublication (b)(2)(B)(i). A or its equivale Other:	ram (Appenmino Acid Spessary) Presessary) Presendable Fraction Sequention Sequential Seq	dix) lequence Subform (CRF) ce Listing on: -R (2 copies) lidentity of about the light of application (if appli	ove copies N PARTS  cument(s)) Power of Attorney Copies of IDS Citations
18. If a CONTI	INUING APPLIC	ATION, check appropriate box, and su or in an Application Data Sheet under	pply the requ	isite information	n below and	in the first se	ntence of the
Continuation Divisional Continuation-in-part (CIP) of prior application No.:							
Prior application information: Examiner							
19. CORRESPONDENCE ADDRESS							
Customer Number: OR Correspondence address below							
Name Camille Jolly-Tornetta							
Address	Address RheoGene, Inc.						
City	2650 Eisenhow Norristown	er Avenue	State PA		·	Zip Code	19403
Country	US		<u> </u>	10/650-8734		Fax	610/650-8755
Name (Print/Ty		Ily-Tornetta		on No. (Attorne	y/Agent) 14	8.592	15.3/300 5/33
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This collection of information is required by 32 FR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (10-03)

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Complete if Known

FEE TRANS	MITTA		Complete if Known							
FEE IRANS	IVILLIA	<b>L</b>	Application Numbe	r Not yet assigned						
for FY 2	004		Filing Date	Herewith						
			First Named Invent							
Effective 10/01/2003. Patent fees are subject to annual revision.  Applicant claims small entity status. See 37 CFR 1.27			Examiner Name							
			Art Unit							
TOTAL AMOUNT OF PAYMENT	(\$) 514.00		Attorney Docket No	. A01381-US						
METHOD OF PAYMENT (check a	all that apply)		FEE	CALCULATION (continued)						
Check Credit card Money Order  Deposit Account:	Other None		ADDITIONAL FEES e Entity   Small Entity Fee   Fee   Fee   Fee	S Fee Description						

METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued)					
Check Credit card Money Other None			3. ADDITIONAL FEES					
Deposit Account:	Large Entity   Small Entity							
Denosit	Denosit				Fee (\$)	Fee Description	D-1-1	
Account   502860	1	1051	٠,,	2051	(\$) 65	Surcharge - late filing fee or oath	Fee Paid	
Number Deposit Account RheoGene, Inc.		1052	50	2052		Surcharge - late provisional filing fee or		
Name RneoGene, Inc.						cover sheet		
The Director is authorized to: (check all that	apply)	1053		1053		Non-English specification		
Charge fee(s) indicated below Cre	edit any overpayments		2,520	1812		For filing a request for ex parte reexamination	<b></b>	
Charge any additional fee(s) or any underp	ayment of fee(s)	1804	920*	1804		Requesting publication of SIR prior to Examiner action		
Charge fee(s) indicated below, except for to the above-identified deposit account.	the filing fee	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action		
FEE CALCULATIO	AAI	1251	110	2251	55	Extension for reply within first month		
	N	1252	420	2252	210	Extension for reply within second month		
1. BASIC FILING FEE Large Entity Small Entity	!	1253	950	2253	475	Extension for reply within third month		
Fee Fee Fee Fee Description	<u>n</u> Fee Paid	1254	1,480	2254	740	Extension for reply within fourth month		
Code (\$) Code (\$) 1001 770 2001 385 Utility filing fee	,	1255	2,010	2255	1,005	Extension for reply within fifth month		
1002 340 2002 170 Design filing fe	\$365	1401	330	2401	165	Notice of Appeal		
1003 530 2003 265 Plant filing fee		1402	330	2402		Filing a brief in support of an appeal		
1004 770 2004 385 Reissue filing		1403	290	2403	145	Request for oral hearing		
1005 160 2005 80 Provisional fili		1451	1,510	1451	1,510	Petition to institute a public use proceeding		
SUBTOTAL (1) (\$) 385		1452	110	2452		Petition to revive - unavoidable		
		1453	1,330	2453	665	Petition to revive - unintentional		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE			1,330	2501	665	Utility issue fee (or reissue)		
Ext <u>ra Claims below</u> Fee Paid		1502	480	2502	240	Design issue fee		
Total Claims 17 -20** = 0 X	E42 6400	1503	640	2503	320	Plant issue fee		
Claims 6 - 3** = 3 X Multiple Dependent	\$43 = \$129	1460	130	1460	130	Petitions to the Commissioner		
,	الـــــا الــــا	1807	50	1807	7 50	Processing fee under 37 CFR 1.17(q)		
Large Entity   Small Entity Fee Fee   Fee Fee Fee Descri	intion	1806	180	1806		Submission of Information Disclosure Stmt		
Code (\$) Code (\$)  1202 18 2202 9 Claims in exc		8021	40	8021	I 40	Recording each patent assignment per property (times number of properties)		
i	claims in excess of 3	1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))		
· · · · · · · · · · · · · · · · · · ·	endent claim, if not paid	1810	770	2810	າ 385	For each additional invention to be		
1204 86 2204 43 ** Reissue in	dependent claims	10.5			, 555	examined (37 CFR 1.129(b))		
over origina	al patent	1801		2801		Request for Continued Examination (RCE)		
	aims in excess of 20 riginal patent	1802	900	1802	900	Request for expedited examination of a design application		
SUBTOTAL (2)	(\$) 129	Other	fee (sp	ecify) _				
**or number previously paid, if greater; For Reissues, see above			*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 514.00					

SUBMITTED BY				(Complete (	if applicable))
Name (Print/Type)	Camille Jolly-Tornetta	Registration No. (Attorney/Agent)	48,592	Telephone	610/650-8734
Signature	Camputon = Inveter			Date	February 9, 2004

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